

**Vermont Mental Health Performance Indicator Project**  
Agency of Human Services, Department of Health, Division of Mental Health  
Weeks Building, 103 South Main Street, Waterbury, VT 05671-1601

MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project  
Advisory Group and Interested Parties

FROM: John Pandiani and Sheila Pomeroy

DATE: December 17, 2004

RE: Vermont State Hospital: Legal Status on Admission: FY 1986 - 2004

The attached graphs and tables provide an overview of Vermont State Hospital (VSH) utilization in terms of legal status on admission for FY1986 through FY2004. This report complements the PIP report on VSH Twenty Year Overview that was distributed on September 26, 2003 (<http://www.ddmhs.state.vt.us/docs/pips/2003/pip092603.pdf>) and the PIP report on VSH: Average Daily Census by Length of Stay: 1982 – 2004 that was distributed on September 24, 2004 (<http://www.ddmhs.state.vt.us/docs/pips/2004/pip092404.pdf>). This report was prepared in response to a request for information from Bessie Weiss, a consultant to the Vermont State Hospital Futures Study.

The information provided includes the number of admissions and the proportion of all admissions for each of four legal status categories (Voluntary, Emergency, Forensic, and Other) for each fiscal year in the reporting period. Information for this report is based on analysis of the Vermont State Hospital database. A brief description of each legal status category is attached. This information was previously published in the annual Vermont Mental Health Statistical Reports for the study period.

As you will see, there has been a substantial reduction in the number of admissions to the Vermont State Hospital during the study period, from about 478 admissions during FY1986 to 219 admissions during FY2004. This reduction was evident for every legal status category, but the amount of change varied substantially among legal status categories. The greatest decrease was evident for voluntary admissions from 116 in 1986 to 13 in 2004 (-89%). Forensic admission decreased the least from 131 in 1986 to 103 in 2004 (-21%).

Viewed as a percent of total admissions, however, the picture is quite different. As a percent of total admissions to the Vermont State Hospital, for instance, forensic admissions increased from 27% in 1986 to 47% in 2004; there was no change in emergency admissions (43% in both years), while voluntary admissions decreased from 24% of all admissions in 1986 to 6% of all admissions in 2004.

The Vermont State Hospital database provides a wealth of information on changing patterns of utilization of this institution over the past 20+ years. In conjunction with other databases, this database can provide information on patterns of access to care and treatment outcomes for this institution. We will welcome your suggestions for further analysis of these rich data sources. Please send your questions and suggestions to [pip@ddmhs.state.vt.us](mailto:pip@ddmhs.state.vt.us) or call 802-241-2638 to discuss possibilities.

## Vermont State Hospital: Legal Status on Admission

Patients are admitted to the Vermont State Hospital in one of several legal statuses. These have been grouped into four categories for purposes of this report: voluntary, emergency, forensic and other. Emergency, forensic and other admissions are all involuntary admissions to the Vermont State Hospital.

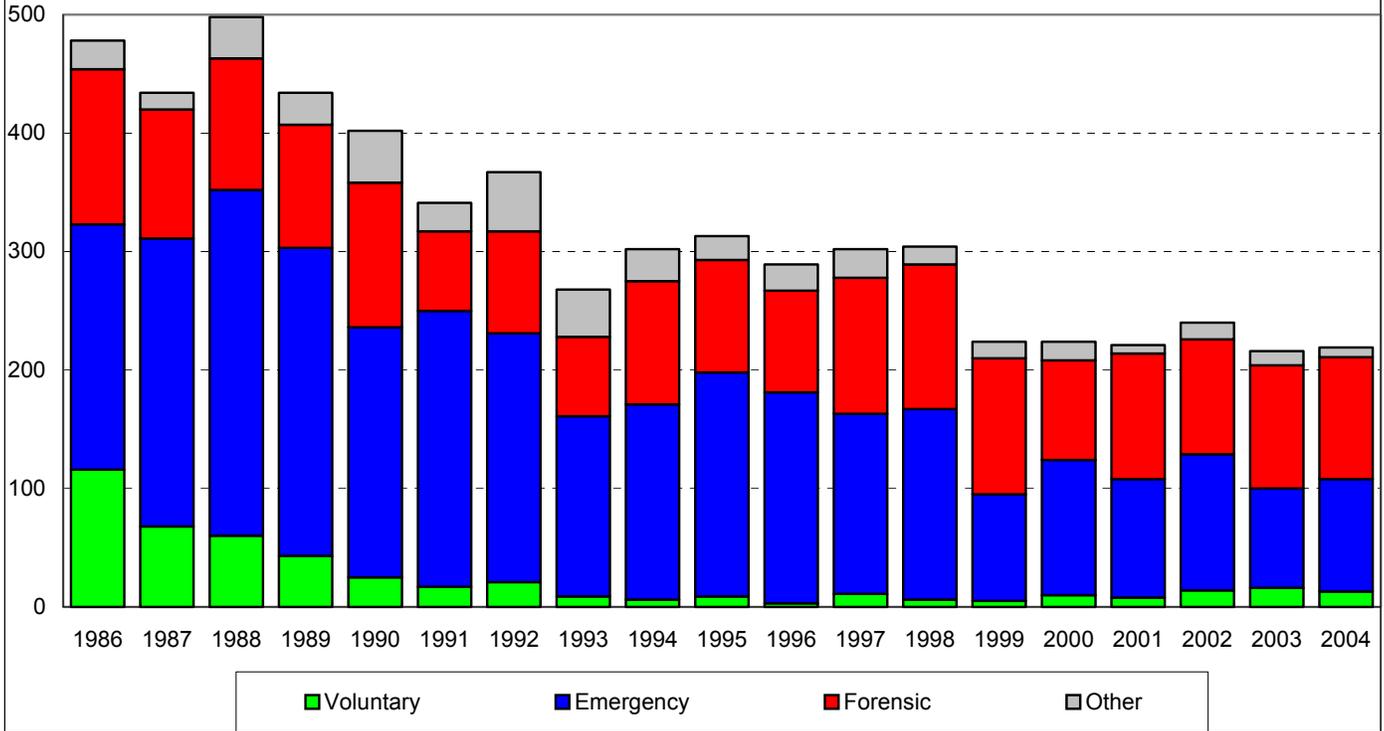
Voluntary admissions include conditional voluntary admissions and regular voluntary admissions. In order to qualify as a conditional voluntary admission, the patient must have enough insight and capacity to make a responsible application. He or she must be mentally ill and in need of hospitalization. He or she must want to be admitted to the hospital as a voluntary patient; no third party may sign the patient in. Conditional voluntary patients must sign a consent form for admission which states that they understand their treatment will involve inpatient status, that they desire to be admitted to the hospital, and that they consent to admission voluntarily, without any coercion or duress. There is no special time limit on this type of admission. When the treatment team feels the patient is well enough to leave the hospital, he or she may be placed on a pre-placement visit, conditionally released, or discharged.

Forensic admissions include admissions for court-ordered observation and commitments following competency and hospitalization hearings. Admissions for observation occur when a district court sends a criminal defendant to the Vermont State Hospital for psychiatric evaluation. An outside forensic psychiatrist sees the patient to determine if he or she was insane at the time of the alleged offense, had the mental state required for the offense charged, or is competent to stand trial for the alleged offense. These orders vary from 15 to 60 days. These patients cannot leave the hospital or be released from the hospital without an order from the court. Once the examination has been completed and the evaluation is received by the court, a hearing date is set for final disposition.

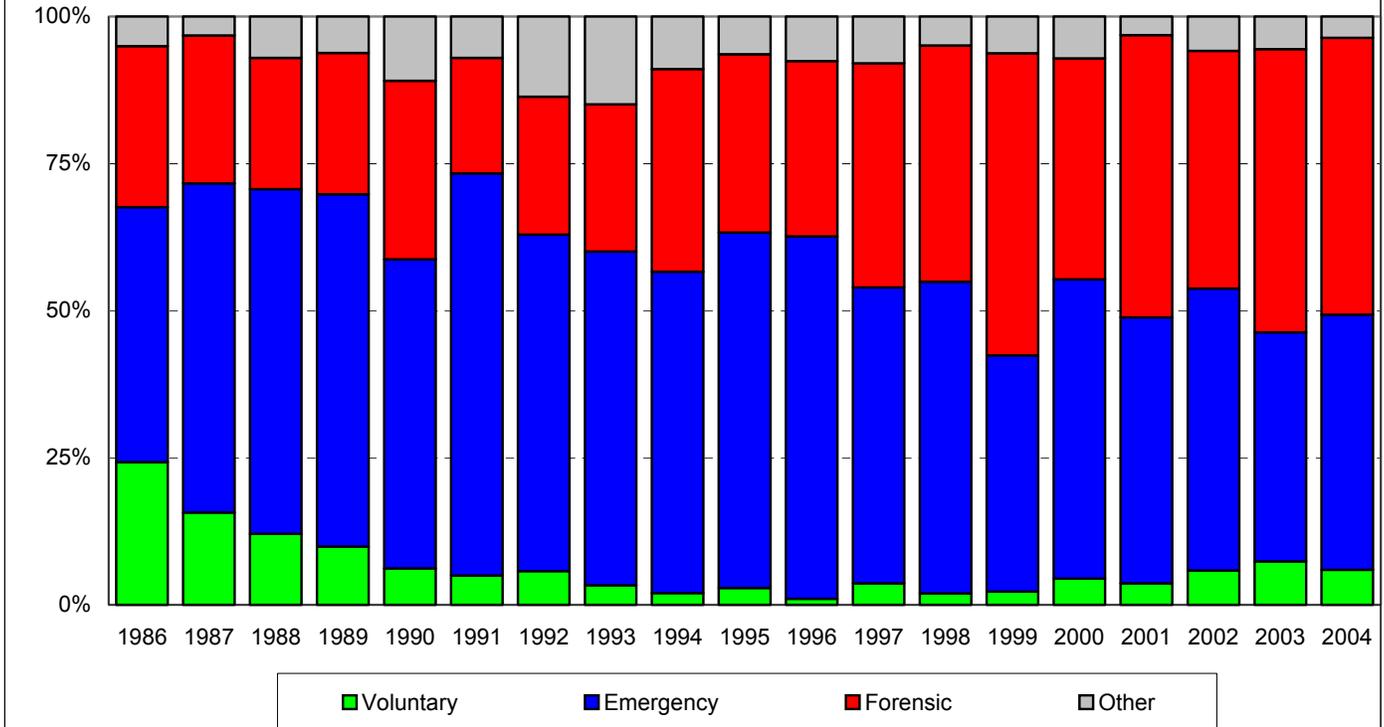
Other types of legal status include revocation of conditional release, revocation of orders of non-hospitalization, involuntary court commitment for 90 days, and transfers under interstate compact. A revocation of conditional release occurs when the head of the hospital revokes a conditional discharge before that discharge becomes absolute because the patient failed to comply with the conditions of the discharge. A revocation of orders of non-hospitalization occurs when a judge revokes an order of non-hospitalization because the patient failed to comply with the conditions of the order. An involuntary court commitment for 90 days applies to a patient who has been committed by the court after having been found mentally ill and in need of treatment. This is a civil commitment for a period not to exceed ninety days. If, prior to the expiration of the court commitment, the treatment team feels the patient is not ready to leave the hospital, they may apply for continued treatment. If the patient is well enough to leave the hospital, he or she may be discharged at the expiration of the court commitment order. Transfers under interstate compact usually occur when the patient is a former Vermont State Hospital patient (this is not a necessary condition, however) and is in an institution in another state. When both states' Departments of Developmental and Mental Health Services agree that it would be in the best interest of the patient to return him or her to this hospital, the patient is transferred on a "transfer under the interstate compact." The patient must be committed to the hospital in the other state since voluntary patients cannot be transferred under this compact.

For more detail visit: <http://www.ddmhs.state.vt.us/docs/res-eval/annual-stats.html> .

**Vermont State Hospital  
Number of Admissions by Legal Status on Admission  
Fiscal Years: 1986 - 2004**



**Vermont State Hospital  
Percent of Admissions by Legal Status on Admission  
Fiscal Years: 1986 - 2004**



**NUMBER  
VERMONT STATE HOSPITAL  
LEGAL STATUS ON ADMISSION AND UTILIZATION  
FISCAL YEARS: 1986 - 2004**

<u>Fiscal Year</u>	<u>Total Admissions</u>	<u>Voluntary Admissions</u>	<u>Emergency Admissions</u>	<u>Forensic Admissions</u>	<u>Other Admissions</u>
2004	219	13	95	103	8
2003	216	16	84	104	12
2002	240	14	115	97	14
2001	221	8	100	106	7
2000	224	10	114	84	16
1999	224	5	90	115	14
1998	304	6	161	122	15
1997	302	11	152	115	24
1996	289	3	178	86	22
1995	313	9	189	95	20
1994	302	6	165	104	27
1993	268	9	152	67	40
1992	367	21	210	86	50
1991	341	17	233	67	24
1990	402	25	211	122	44
1989	434	43	260	104	27
1988	498	60	292	111	35
1987	434	68	243	109	14
1986	478	116	207	131	24

**PERCENT  
VERMONT STATE HOSPITAL  
LEGAL STATUS ON ADMISSION AND UTILIZATION  
FISCAL YEARS: 1986 - 2004**

<u>Fiscal Year</u>	<u>Total Admissions</u>	<u>Voluntary Admissions</u>	<u>Emergency Admissions</u>	<u>Forensic Admissions</u>	<u>Other Admissions</u>
2004	100%	6%	43%	47%	4%
2003	100%	7%	39%	48%	6%
2002	100%	6%	48%	40%	6%
2001	100%	4%	45%	48%	3%
2000	100%	4%	51%	38%	7%
1999	100%	2%	40%	51%	6%
1998	100%	2%	53%	40%	5%
1997	100%	4%	50%	38%	8%
1996	100%	1%	62%	30%	8%
1995	100%	3%	60%	30%	6%
1994	100%	2%	55%	34%	9%
1993	100%	3%	57%	25%	15%
1992	100%	6%	57%	23%	14%
1991	100%	5%	68%	20%	7%
1990	100%	6%	52%	30%	11%
1989	100%	10%	60%	24%	6%
1988	100%	12%	59%	22%	7%
1987	100%	16%	56%	25%	3%
1986	100%	24%	43%	27%	5%